

REPORT OF RECEIPTS AND DISBURSEMENTS  
For Other Than An Authorized Committee  
(Summary Page)

RECEIVED  
FEC MAIL ROOM

2000 DEC -4 P 2:39

1. NAME OF COMMITTEE (In full) <b>Erie Indemnity Company PAC - Federal</b>		2. FEC IDENTIFICATION NUMBER <b>CDD163577</b>
ADDRESS (number and street) <b>100 Erie Insurance Place</b>	<input type="checkbox"/> Check if different than previously reported	3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee (see FEC FORM 1M)
CITY, STATE and ZIP CODE <b>Erie, PA 16530</b>		

4. TYPE OF REPORT

- (a) ☐ April 15 Quarterly Report  
☐ July 15 Quarterly Report  
☐ October 15 Quarterly Report  
☐ January 31 Year End Report  
☐ July 31 Mid-Year Report (Non-election Year Only)  
☐ Termination Report
- Monthly Report Due On:  
☐ February 20 ☐ June 20 ☐ October 20  
☐ March 20 ☐ July 20 ☐ November 20  
☐ April 20 ☐ August 20 ☐ December 20  
☐ May 20 ☐ September 20 ☐ January 31
- ☐ Twelfth day report preceding election on \_\_\_\_\_ in the State of \_\_\_\_\_
- ☒ Thirtieth day report following the General Election on 11-07-00 in the State of PA
- (b) Is this Report an Amendment? ☐ YES ☒ NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>10-19-00</u> through <u>11-27-00</u>		
6. (a) Cash on Hand January 1, 20 <u>00</u>		<b>\$2,427.87</b>
(b) Cash on Hand at Beginning of Reporting Period	<b>\$1,730.33</b>	
(c) Total Receipts (from Line 19)	<b>\$1,056.82</b>	<b>\$6,541.28</b>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	<b>\$2,819.15</b>	<b>\$8,959.15</b>
7. Total Disbursements (from Line 30)		<b>\$6,150.00</b>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<b>\$2,819.15</b>	<b>\$2,819.15</b>
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)		Federal Election Commission 999 E Street, NW Washington, DC 20483
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)		Toll Free 800-424-9530 Local 202-219-3420

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer  
**Jan R. Van Gorder**

Signature of Treasurer

*Jan R. Van Gorder*

Date

11/30/00

Submission of false, erroneous, or incomplete information may subject signer to penalties of 2 U.S.C.437g.

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FEC FORM 3X

**DETAILED SUMMARY PAGE  
of Receipts and Disbursements  
Page 2, FEC FORM 3X**

NAME OF COMMITTEE <b>Erie Indemnity Company PAC - Federal</b>		REPORT COVERING PERIOD FROM 10-19-00 TO: 11-27-00	
		COLUMN A Total This Period	COLUMN B Calendar Year
<b>I. Receipts</b>			
11. Contributions (other than loans) From:			
a. Individuals/Persons Other Than Political Committees			
i. Itemized (Use Schedule A) . . . . .	\$797.92	\$4,662.79	11ai
ii. Unitemized . . . . .	\$290.90	\$1,878.49	11aii
iii. Total . . . . . (add i and ii) >	\$1,088.82	\$6,541.28	11aiii
b. Political Party Committees . . . . .	0	0	11(b)
c. Other Political Committees (such as PACs) . . . . .	0	0	11(c)
d. Total Contributions . . . . . (add a iii, b and c) >	\$1,088.82	\$6,541.28	11(d)
12. Transfers From Affiliated/Other Party Committees . . . . .	0	0	12
13. All Loans Received . . . . .	0	0	13
14. Loan Repayments Received . . . . .	0	0	14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) . . . . .	0	0	15
16. Refunds of Contributions Made . . . . .	0	0	16
17. Other Federal Receipts (Dividends, Interest, etc.) . . . . .	0	0	17
18. Transfers from Nonfederal Account for Joint Activity . . . . .	0	0	18
19. Total Receipts . . . . . (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	\$1,088.82	\$6,541.28	19
20. Total Federal Receipts . . . . . (subtract line 18 from line 19) >	\$1,088.82	\$6,541.28	20
<b>II. Disbursements</b>			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share . . . . .	0	0	21ai
ii. Non-Federal Share . . . . .	0	0	21aii
b. Other Federal Operating Expenditures . . . . .	0	\$5,000.00	21(b)
c. Total Operating Expenditures . . . . . (add a i, a ii, and b) >	0	\$5,000.00	21(c)
22. Transfers to Affiliated/Other Party Committees . . . . .	0	0	22
23. Contributions to Federal Candidates and Political Committees . . . . .	0	0	23
24. Independent Expenditures (use Schedule E) . . . . .	0	0	24
25. Coordinated Expenditures by Party Committees (Schedule F) . . . . .	0	0	25
26. Loan Repayments Made . . . . .	0	0	26
27. Loans Made . . . . .	0	0	27
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees . . . . .	0	0	28a
b. Political Party Committees . . . . .	0	0	28b
c. Other Political Committees (such as PACs) . . . . .	0	0	28c
d. Total Contribution Refunds . . . . . (add a, b and c) >	0	0	28d
29. Other Disbursements . . . . .	0	\$1,150.00	29
30. Total Disbursements . . . . . (21c+22+23+24+25+26+27+28d+29) >	0	\$6,150.00	30
31. Total Federal Disbursements . . . . . (subtract line 21aii from line 30) >	0	\$6,150.00	31
<b>III. Net Contributions/Operating Expenditures</b>			
32. Total Contributions (other than loans)(from line 11d) . . . . .	\$1,088.82	\$6,541.28	32
33. Total Contribution Refunds (from line 28d) . . . . .	0	0	33
34. Net Contributions (other than loans)(subtract line 33 from 32) . . . . .	\$1,088.82	\$6,541.28	34
35. Total Federal Operating Expenditures . . . . . (add 21 a i and 21 b) >	0	\$5,000.00	35
36. Offsets to Operating Expenditures (from line 15) . . . . .	0	0	36
37. Net Operating Expenditures . . . . . (subtract line 36 from 35) >	0	\$5,000.00	37

**SCHEDULE A**

**ITEMIZED RECEIPTS**

PAGE 1 OF 2  
FOR LINE NUMBER 11(a)(i)

**Contributions from Individuals/Persons**

Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it.

NAME OF COMMITTEE (in Full)

**Erie Indemnity Company PAC - Federal**

**C00153577**

<b>A. Full Name, Mailing Address and ZIP Code</b> <b>John J. Brinling Jr.</b> <b>5691 Culpepper Drive</b> <b>Erie, PA 16506</b>	<b>Name of Employer</b> Erie Insurance Group	<b>Date</b> 10-25-00	<b>Amount this pd.</b> \$115.40
	<b>Occupation</b> Executive Vice Pres.	11-20-00	\$115.40
	<b>Year-to-Date &gt;</b> \$1,364.80		
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
<b>B. Full Name, Mailing Address and ZIP Code</b> <b>Douglas N. Fitzgerald</b> <b>2311 Wedgewood Way</b> <b>York, PA 17404</b>	<b>Name of Employer</b> Erie Insurance Group	<b>Date</b> 10-26-00	<b>Amount this pd.</b> \$66.80
	<b>Occupation</b> Regional Vice Pres.	11-20-00	\$66.80
	<b>Year-to-Date &gt;</b> \$790.47		
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
<b>C. Full Name, Mailing Address and ZIP Code</b> <b>Terry L. Hamman</b> <b>3020 Atoll Drive</b> <b>Lewis Center, OH 43035</b>	<b>Name of Employer</b> Erie Insurance Group	<b>Date</b> 10-25-00	<b>Amount this pd.</b> \$54.26
	<b>Occupation</b> Regional Vice Pres.	11-20-00	\$54.26
	<b>Year-to-Date &gt;</b> \$637.26		
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
<b>D. Full Name, Mailing Address and ZIP Code</b> <b>John Machmer</b> <b>4673 East Main Street, #36</b> <b>Whitehall, OH 43213</b>	<b>Name of Employer</b> Erie Insurance Group	<b>Date</b> 10-26-00	<b>Amount this pd.</b> \$20.34
	<b>Occupation</b> Supervisor	11-20-00	\$20.34
	<b>Year-to-Date &gt;</b> \$240.18		
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
<b>E. Full Name, Mailing Address and ZIP Code</b> <b>Robert F. Morgan Jr.</b> <b>1572 Buckshot Court</b> <b>Worthington, OH 43085</b>	<b>Name of Employer</b> Erie Insurance Group	<b>Date</b> 10-25-00	<b>Amount this pd.</b> \$21.00
	<b>Occupation</b> VP & Claims Manager	11-20-00	\$21.00
	<b>Year-to-Date &gt;</b> \$251.60		
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
<b>F. Full Name, Mailing Address and ZIP Code</b> <b>Jerrold V. Murphy</b> <b>1215-20 Street</b> <b>Vienna, WV 26105</b>	<b>Name of Employer</b> Erie Insurance Group	<b>Date</b> 10-25-00	<b>Amount this pd.</b> \$43.46
	<b>Occupation</b> VP & Branch Manager	11-20-00	\$43.46
	<b>Year-to-Date &gt;</b> \$510.74		
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
<b>G. Full Name, Mailing Address and ZIP Code</b> <b>Stacey E. Nicholson</b> <b>1175 Bay Ridge Road</b> <b>Annapolis, MD 21403</b>	<b>Name of Employer</b> Erie Insurance Group	<b>Date</b> 10-25-00	<b>Amount this pd.</b> \$31.12
	<b>Occupation</b> Branch Sales Manager	11-20-00	\$31.12
	<b>Year-to-Date &gt;</b> \$356.72		
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

**SUBTOTAL of Receipts This Page (optional)** >

**\$704.78**

**TOTAL This Period (last page this line number only)** >

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## SCHEDULE A

## ITEMIZED RECEIPTS

PAGE 2 OF 2

## Contributions from Individuals/Persons

FOR LINE NUMBER  
11(a)(i)

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NAME OF COMMITTEE (in Full)

Erie Indemnity Company PAC - Federal

C00153577

<b>A. Full Name, Mailing Address and ZIP Code</b> Eric D. Root 62 Belleclaire Drive Rochester, NY 14617	<b>Name of Employer</b> Erie Insurance Group	<b>Date</b> 10-25-00 11-20-00	<b>Amount this pd.</b>  \$46.58 \$46.58
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Occupation</b> Branch Manager	<b>Year-to-Date &gt;</b>	\$491.12
<b>B. Full Name, Mailing Address and ZIP Code</b>  	<b>Name of Employer</b>  	<b>Date</b>  	<b>Amount this pd.</b>  
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Occupation</b>  	<b>Year-to-Date &gt;</b>	
<b>C. Full Name, Mailing Address and ZIP Code</b>  	<b>Name of Employer</b>  	<b>Date</b>  	<b>Amount this pd.</b>  
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Occupation</b>  	<b>Year-to-Date &gt;</b>	
<b>D. Full Name, Mailing Address and ZIP Code</b>  	<b>Name of Employer</b>  	<b>Date</b>  	<b>Amount this pd.</b>  
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Occupation</b>  	<b>Year-to-Date &gt;</b>	
<b>E. Full Name, Mailing Address and ZIP Code</b>  	<b>Name of Employer</b>  	<b>Date</b>  	<b>Amount this pd.</b>  
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Occupation</b>  	<b>Year-to-Date &gt;</b>	
<b>F. Full Name, Mailing Address and ZIP Code</b>  	<b>Name of Employer</b>  	<b>Date</b>  	<b>Amount this pd.</b>  
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Occupation</b>  	<b>Year-to-Date &gt;</b>	
<b>G. Full Name, Mailing Address and ZIP Code</b>  	<b>Name of Employer</b>  	<b>Date</b>  	<b>Amount this pd.</b>  
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Occupation</b>  	<b>Year-to-Date &gt;</b>	
<b>SUBTOTAL of Receipts This Page (optional)</b> ..... >			\$93.16
<b>TOTAL This Period (last page this line number only)</b> ..... >			\$797.92

**METHOD OF ALLOCATION FOR SHARED FEDERAL  
AND NON-FEDERAL ADMINISTRATIVE EXPENSES  
AND GENERIC VOTER DRIVE COSTS**

NAME OF COMMITTEE

Erie Indemnity Company PAC - Federal

## NATIONAL PARTY COMMITTEES

FIXED FEDERAL PERCENTAGE (Check the appropriate line and enter % in box to right)

☐ PRESIDENTIAL YEAR (65%)☐ ALL OTHER YEARS (60%)

## HOUSE AND SENATE PARTY CAMPAIGN COMMITTEES

☐ MINIMUM FEDERAL PERCENTAGE (65%) (If checked, enter 65% in box to right) . . .

OR

☐ FUNDS EXPENDED:

o ESTIMATED DIRECT CANDIDATE SUPPORT -- FEDERAL . . . . .

o ESTIMATED DIRECT CANDIDATE SUPPORT -- NON-FEDERAL

ADJUSTMENTS TO FUNDS EXPENDED:

ACTUAL DIRECT CANDIDATE SUPPORT -- FEDERAL . . . . .

ACTUAL DIRECT CANDIDATE SUPPORT -- NON-FEDERAL

NOTE: Funds expended must be used if the Federal Proportion is greater than 65% in any year.

## SEPARATE SEGREGATED FUNDS AND NON-CONNECTED COMMITTEES

FUNDS EXPENDED:

o ESTIMATED DIRECT CANDIDATE SUPPORT -- FEDERAL . . . . .

o ESTIMATED DIRECT CANDIDATE SUPPORT -- NON-FEDERAL

ADJUSTMENTS TO FUNDS EXPENDED:

ACTUAL DIRECT CANDIDATE SUPPORT -- FEDERAL . . . . .

ACTUAL DIRECT CANDIDATE SUPPORT -- NON-FEDERAL

## STATE AND LOCAL PARTY COMMITTEES

## BALLOT COMPOSITION

CHECK ALL OFFICES APPEARING ON THE NEXT GENERAL ELECTION BALLOT:

1. PRESIDENT . . . . . ☐ (1 POINT) . . . . .2. U.S. SENATE . . . . . ☐ (1 POINT) . . . . .3. U.S. CONGRESS . . . . . ☐ (1 POINT) . . . . .

4. SUBTOTAL -- FEDERAL (ADD 1, 2, AND 3) . . . . .

5. GOVERNOR . . . . . ☐ (1 POINT) . . . . .6. OTHER STATEWIDE OFFICE(S) . . . . . ☐ (1 OR 2 POINTS) . . . . .7. STATE SENATE . . . . . ☐ (1 POINT) . . . . .8. STATE REPRESENTATIVE . . . . . ☐ (1 POINT) . . . . .9. LOCAL CANDIDATES . . . . . ☐ (1 OR 2 POINTS) . . . . .10. EXTRA NON-FEDERAL POINT . . . . . ☐ (1 POINT) . . . . .

11. SUBTOTAL -- NON-FEDERAL (ADD 5, 6, 7, 8, 9, AND 10) . . . . .

12. TOTAL POINTS (LINE 4 PLUS LINE 11) . . . . .

FEDERAL ALLOCATION = LINE 4 DIVIDED BY LINE 12 . . . . .

NUMBER OF  
POINTS

RECEIPT SCHEDULE H3

TRANSFERS FROM  
NON-FEDERAL ACCOUNTS

PAGE 1	OF 1
FOR LINE 18	

NAME OF COMMITTEE	Total Amount Transferred
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NAME OF ACCOUNT	DATE OF RECEIPT
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	BREAKDOWN OF TRANSFER RECEIVED		
	Admin/Voter Drive Amount	Direct Fund-raising Amount	Exempt Activity/Direct Candidate Support
i) Total Administrative/Voter Drive . . . . .			
ii) Direct Fundraising (List Events-Amount)			
a) _____			
b) _____			
c) _____			
d) _____			
e) Total Amount Transferred For Direct . .			
iii) Exempt Activity/Direct Candidate Support (List Events-Amount For Each)			
a) _____			
b) _____			
c) _____			
d) _____			
e) Total Amount Transferred For Exempt Activity/Direct Candidate Support . . .			

NAME OF ACCOUNT	DATE OF RECEIPT
-----------------	-----------------

	BREAKDOWN OF TRANSFER RECEIVED		
	Admin/Voter Drive Amount	Direct Fund-raising Amount	Exempt Activity/Direct Candidate Support
i) Total Administrative/Voter Drive . . . . .			
ii) Direct Fundraising (List Events-Amount)			
a) _____			
b) _____			
c) _____			
d) _____			
e) Total Amount Transferred For Direct . .			
iii) Exempt Activity/Direct Candidate Support (List Events-Amount For Each)			
a) _____			
b) _____			
c) _____			
d) _____			
e) Total Amount Transferred For Exempt Activity/Direct Candidate Support . . .			

	Totals for Breakdown of Transfer Received		
	Admin/Voter Drive Amount	Direct Fund-raising Amount	Exempt Activity/DCS
SUBTOTAL THIS PAGE . . . . .	- 0 -	- 0 -	- 0 -
TOTAL THIS PERIOD . . . . .	- 0 -	- 0 -	- 0 -

## Federal Election Commission

**ENVELOPE REPLACEMENT PAGE  
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C) 12/1/00
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
CR PREPARER	12/4/00 DATE PREPARED

(6/2000)